

FEC FORM 5**REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED****To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit Corporations**

1. (a) Name of Individual, Organization or Corporation League of Conservation Voters, Inc.		3. FEC Identification Number C C90005786
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 1920 L St NW Suite 800		
(c) City, State and ZIP Code Washington DC 20036		
2. Corporate filers only	Is the filer a qualified nonprofit corporation? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Individual filers only	Name of Employer	Occupation

4. TYPE OF REPORT (check appropriate boxes):

- (a) ☐ April 15 Quarterly Report ☐ 24-Hour Notice ☒ 48-Hour Notice
- ☐ July 15 Quarterly Report
- ☐ October Quarterly Report
- ☐ January 31 Year-End Report

(b) Is this Report an amendment? Yes ☐ No ☒

5. COVERING PERIOD: FROM

M	M
0	9

 /

D	D
1	4

 /

Y	Y	Y	Y
2	0	1	0

THROUGH

M	M
0	9

 /

D	D
2	0

 /

Y	Y	Y	Y
2	0	1	0

6. TOTAL CONTRIBUTIONS

0.00

7. TOTAL INDEPENDENT EXPENDITURES.....

10680.11

Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of, or in constitution with, or at the request or suggestion of, a candidate or a candidate's agent or authorized committee or a political party committee or its agent. In addition, if the independent expenditures reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

SIGNATURE

DATE

Patrick Collins

09/22/2010

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C. 437g.

For further information, contact:

Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

Image# 10991223114
SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

PAGE 2 / 8

FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

League of Conservation Voters, Inc.

Full Name (Last, First, Middle Initial) of Payee
Nick Morelock

Date

M M / D D / Y Y Y Y
0 9 / 1 6 / 2 0 1 0

Mailing Address
7319 Silverheel

Amount

1750.00

City
Shawnee

State
KS

Zip Code
66227-2104

Purpose of Expenditure
Salary

Category/
Type

Office Sought:

☐ House

State: MO

Senate

☒ Senate

District: _____

☐ President

Check One:

☒ Support

☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:
Robin Carnahan

Calendar Year-To-Date Per Election
for Office Sought

151233.46

Disbursement For:
2010

☐ Primary

☒ General

☐ Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Mustafa Qaderi

Date

M M / D D / Y Y Y Y
0 9 / 1 6 / 2 0 1 0

Mailing Address
5724 N Antioch Dr

Amount

1500.00

City
Kansas City

State
MO

Zip Code
64119-2020

Purpose of Expenditure
Salary

Category/
Type

Office Sought:

☐ House

State: MO

Senate

☒ Senate

District: _____

☐ President

Check One:

☒ Support

☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:
Robin Carnahan

Calendar Year-To-Date Per Election
for Office Sought

151233.46

Disbursement For:
2010

☐ Primary

☒ General

☐ Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Enterprise via Commerce Bank

Date

M M / D D / Y Y Y Y
0 9 / 1 6 / 2 0 1 0

Mailing Address
P.O. Box 411036

Amount

5012.54

City
Kansas City

State
MO

Zip Code
64141

Purpose of Expenditure
Van Rental

Category/
Type

Office Sought:

☐ House

State: MO

Senate

☒ Senate

District: _____

☐ President

Check One:

☒ Support

☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:
Robin Carnahan

Calendar Year-To-Date Per Election
for Office Sought

151233.46

Disbursement For:
2010

☐ Primary

☒ General

☐ Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures

8262.54

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures
(carry total from last page forward to Line 7)

Image# 10991223115
SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

PAGE **3 / 8**

FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

League of Conservation Voters, Inc.

Full Name (Last, First, Middle Initial) of Payee
Gary Brewer

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	0		2	0	1	0

Mailing Address
599 Roue St Dennis

Amount

210.00

City State Zip Code
Florissant MO 63031

Purpose of Expenditure
Canvasser

Category/
Type

Office Sought: ☐ House State: MO
☒ Senate
☐ President District: _____

Check One: ☒ Support ☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:
Robin Carnahan

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) _____

Calendar Year-To-Date Per Election
for Office Sought 153651.03

Full Name (Last, First, Middle Initial) of Payee
PC Signs

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	0		2	0	1	0

Mailing Address
2534 Commerce Blvd

Amount

187.57

City State Zip Code
Cincinnati OH 45241

Purpose of Expenditure
Printing Services

Category/
Type

Office Sought: ☐ House State: MO
☒ Senate
☐ President District: _____

Check One: ☒ Support ☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:
Robin Carnahan

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) _____

Calendar Year-To-Date Per Election
for Office Sought 153651.03

Full Name (Last, First, Middle Initial) of Payee
Chris Brewer

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	0		2	0	1	0

Mailing Address
4001 Washington St

Amount

210.00

City State Zip Code
Kansas City MO 64109

Purpose of Expenditure
Canvasser

Category/
Type

Office Sought: ☐ House State: MO
☒ Senate
☐ President District: _____

Check One: ☒ Support ☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:
Robin Carnahan

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) _____

Calendar Year-To-Date Per Election
for Office Sought 153651.03

(a) **SUBTOTAL** of Itemized Independent Expenditures

607.57

(b) **SUBTOTAL** of Unitemized Independent Expenditures

(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

Image# 10991223116
SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

PAGE **4 / 8**

FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

League of Conservation Voters, Inc.

Full Name (Last, First, Middle Initial) of Payee
Karen Duckworth

Date

/ /

Mailing Address
621 W 43rd

Amount

City State Zip Code
Kansas City MO 64111

Purpose of Expenditure
Canvasser

Category/
Type

Office Sought: ☐ House State: MO
☒ Senate
☐ President District:

Check One: ☒ Support ☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:
Robin Carnahan

Calendar Year-To-Date Per Election
for Office Sought

Disbursement For: ☐ Primary ☒ General
☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee
Jerry Steiner

Date

/ /

Mailing Address
406 Woodland Avenue

Amount

City State Zip Code
Smithville MO 64089-9389

Purpose of Expenditure
Canvasser

Category/
Type

Office Sought: ☐ House State: MO
☒ Senate
☐ President District:

Check One: ☒ Support ☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:
Robin Carnahan

Calendar Year-To-Date Per Election
for Office Sought

Disbursement For: ☐ Primary ☒ General
☐ Other (specify)

Full Name (Last, First, Middle Initial) of Payee
Patrick Coriolon

Date

/ /

Mailing Address
8417 Isabel Street

Amount

City State Zip Code
Kansas City KS 66112

Purpose of Expenditure
Canvasser

Category/
Type

Office Sought: ☐ House State: MO
☒ Senate
☐ President District:

Check One: ☒ Support ☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:
Robin Carnahan

Calendar Year-To-Date Per Election
for Office Sought

Disbursement For: ☐ Primary ☒ General
☐ Other (specify)

(a) **SUBTOTAL** of Itemized Independent Expenditures

(b) **SUBTOTAL** of Unitemized Independent Expenditures

(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

Image# 10991223117
SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

PAGE 5 / 8

FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

League of Conservation Voters, Inc.

Full Name (Last, First, Middle Initial) of Payee
Dexter Gunnels

Date

M M / D D / Y Y Y Y
0 9 / 2 0 / 2 0 1 0

Mailing Address
3521 Baltimore Ave

Amount

210.00

City State Zip Code
Kansas City MO 64111

Purpose of Expenditure
Canvasser

Category/
Type

Office Sought: ☐ House State: MO
☒ Senate
☐ President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Robin Carnahan

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought 153651.03

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Chris Dooley

Date

M M / D D / Y Y Y Y
0 9 / 2 0 / 2 0 1 0

Mailing Address
20 W 36th St #415

Amount

80.00

City State Zip Code
Kansas City MO 64111

Purpose of Expenditure
Canvasser

Category/
Type

Office Sought: ☐ House State: MO
☒ Senate
☐ President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Robin Carnahan

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought 153651.03

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Douglas Langner

Date

M M / D D / Y Y Y Y
0 9 / 2 0 / 2 0 1 0

Mailing Address
355 Dams

Amount

130.00

City State Zip Code
Liberty MO 64068

Purpose of Expenditure
Canvasser

Category/
Type

Office Sought: ☐ House State: MO
☒ Senate
☐ President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Robin Carnahan

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election
for Office Sought 153651.03

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures

420.00

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures
(carry total from last page forward to Line 7)

Image# 10991223118
SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

PAGE 6 / 8

FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

League of Conservation Voters, Inc.

Full Name (Last, First, Middle Initial) of Payee
Donald Pesek

Date

M M / D D / Y Y Y Y
0 9 / 2 0 / 2 0 1 0

Mailing Address
8417 Isabel

Amount

50.00

City State Zip Code
Kansas City KS 66112

Purpose of Expenditure
Canvasser

Category/
Type

Office Sought: ☐ House State: MO
☒ Senate
☐ President District: _____

Check One: ☒ Support ☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:
Robin Carnahan

Calendar Year-To-Date Per Election
for Office Sought 153651.03

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Michael Froehlich

Date

M M / D D / Y Y Y Y
0 9 / 2 0 / 2 0 1 0

Mailing Address
6026 McGee

Amount

210.00

City State Zip Code
Kansas City MO 64113

Purpose of Expenditure
Canvasser

Category/
Type

Office Sought: ☐ House State: MO
☒ Senate
☐ President District: _____

Check One: ☒ Support ☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:
Robin Carnahan

Calendar Year-To-Date Per Election
for Office Sought 153651.03

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Adam Fetter

Date

M M / D D / Y Y Y Y
0 9 / 2 0 / 2 0 1 0

Mailing Address
7111 Inkberry Drive

Amount

210.00

City State Zip Code
Houston TX 77092

Purpose of Expenditure
Canvasser

Category/
Type

Office Sought: ☐ House State: MO
☒ Senate
☐ President District: _____

Check One: ☒ Support ☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:
Robin Carnahan

Calendar Year-To-Date Per Election
for Office Sought 153651.03

Disbursement For: ☐ Primary ☒ General
☐ Other (specify) _____

(a) **SUBTOTAL** of Itemized Independent Expenditures

470.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures

(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

PAGE 7 / 8

FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

League of Conservation Voters, Inc.

Full Name (Last, First, Middle Initial) of Payee
Brennan Crawford

Date

M M / D D / Y Y Y Y
0 9 / 2 0 / 2 0 1 0Mailing Address
510 Traey Avenue

Amount

80.00

City

Kansas City

State

MO

Zip Code

64106

Purpose of Expenditure
CanvasserCategory/
Type

Office Sought:

☐ House

State: MO

Senate

☒ Senate

District: _____

☐ President

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
Robin CarnahanCalendar Year-To-Date Per Election
for Office Sought

153651.03

Disbursement For:
2010☐ Primary☒ General☐ Other (specify) _____Full Name (Last, First, Middle Initial) of Payee
Deon Young

Date

M M / D D / Y Y Y Y
0 9 / 2 0 / 2 0 1 0Mailing Address
3007 W McGee St

Amount

210.00

City

Kansas City

State

MO

Zip Code

64108

Purpose of Expenditure
CanvasserCategory/
Type

Office Sought:

☐ House

State: MO

Senate

☒ Senate

District: _____

☐ President

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
Robin CarnahanCalendar Year-To-Date Per Election
for Office Sought

153651.03

Disbursement For:
2010☐ Primary☒ General☐ Other (specify) _____Full Name (Last, First, Middle Initial) of Payee
Wilma Dooley

Date

M M / D D / Y Y Y Y
0 9 / 2 0 / 2 0 1 0Mailing Address
1514 E 18th St #201

Amount

80.00

City

Kansas City

State

MO

Zip Code

64111

Purpose of Expenditure
CanvasserCategory/
Type

Office Sought:

☐ House

State: MO

Senate

☒ Senate

District: _____

☐ President

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
Robin CarnahanCalendar Year-To-Date Per Election
for Office Sought

153651.03

Disbursement For:
2010☐ Primary☒ General☐ Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures

370.00

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

PAGE 8 / 8

FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

League of Conservation Voters, Inc.

Full Name (Last, First, Middle Initial) of Payee
Earlita Prewitt

Date

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	0		2	0	1	0

Mailing Address
2925 Victor

Amount

50.00

City
Kansas CityState
MOZip Code
64128Purpose of Expenditure
CanvasserCategory/
Type

Office Sought:

☐

House

State: MO

Senate

☒

Senate

☐

President

District: _____

Check One:

☒

Support

☐

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:
Robin CarnahanCalendar Year-To-Date Per Election
for Office Sought

153651.03

Disbursement For:
2010☐

Primary

☒

General

☐ Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures

50.00

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures
(carry total from last page forward to Line 7)

10680.11